#### Case 16-36683 Doc 1 Filed 11/17/16 Entered 11/17/16 14:56:51 Desc Main Document Page 1 of 72

Fill in this information to identify your case:	
United States Bankruptcy Court for the:	
Northern District of: Illinois (State)	
Case number (if known)	Chapter you are filing under:
	Chapter 7 Chapter 11
	Chapter 12 Chapter 13

#### Official Form 101

#### **Voluntary Petition for Individuals Filing for Bankruptcy**

12/15

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Identify Yourself	f	
	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1. Your full name	JaTaun	
Write the name that is on	First name	First name
your government-issued picture identification (for	Middle name	Middle name
example, your driver's	Robinson-Swopes	
license or passport	Last name	Last name
Bring your picture identification to your meeting with the trustee.	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
2. All other names you		
have used in the	First name	First name
last 8 years		
Include your married or	Middle name	Middle name
maiden names.	Last name	Last name
	First name	First name
	Middle name	Middle name
	Last name	Last name
3. Only the last 4 digits of your	XXX - XX	xxx - xx-
digits of your Social Security number or federal	OR	OR
Individual Taxpayer Identification number (ITIN)	9 xx - xx-	9 xx - xx-
00:115	W.L. ( D. (4) ( L.	

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DC	First Name	Middle Name	Last Name	Case Hullibel (II known)	·	
		About Debtor 1:		About Debtor	2 (Spouse Only	in a Joint Case):
	Any business names and Employer	✓ I have not used any busines	s names or EINs.	I have not use	sed any business name	es or EINs.
	Identification Numbers (EIN) you have used in the	Business name		Business name	Э	
	last 8 years	Business name		Business name	Э	
	Include trade names and doing business as names	EIN		EIN		•
		EIN		EIN		
5.	Where you live	45005 411 4		If Debtor 2 lives	s at a different addre	ss:
		15825 Albany Ave.  Number Street		Number	Street	
		Markham Illinois	60428			
		City State  Cook	Zip Code	City	State	Zip Code
		County	-	County		
		•		County		
		If your mailing address is diffe				ent from yours, fill it
		fill it in here. Note that the court	will send any notices to you at		the court will send any	notices to this mailing
		this mailing address.		address.		
		Number Street		Number	Street	
		City State	Zip Code	0.1	Otata	7'- 0-1-
		City State	Zip Code	City	State	Zip Code
	Why you are	Check one:		Check one:		
	district to file for	Over the last 180 days before lived in this district longer the			t 180 days before filing district longer than in a	
	bankruptcy		ain. (See 28 U.S.C. §§ 1408.)		er reason. Explain. (Se	
			, , ,			
					-	

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Debtor 1 Jalaun	Robinson-Swopes Case number (if known)
Part 2: Tell the Court	Middle Name Last Name About Your Bankruptcy Case
7. The chapter of the Bankruptcy Code you are choosing t file under	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form B2010)). Also, go to the top of page 1 and check the appropriate box.
8. How you will pay the fee	<ul> <li>☑ I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address.</li> <li>☐ I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay Your Filing Fee in Installments (Official Form 103A).</li> <li>☐ I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition.</li> </ul>
9. Have you filed for bankruptcy within the last 8 years?	✓ No.           Yes. District         When Case number
10. Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, by an affiliate?	Yes. Debtor Relationship to you  District When Case number, if known  MM / DD / YYYY  Debtor Relationship to you
11. Do you rent your residence?	<ul> <li>✓ No. Go to line 12.</li> <li>✓ Yes. Has your landlord obtained an eviction judgment against you and do you want to stay in your residence?</li> <li>✓ No. Go to line 12.</li> <li>✓ Yes. Fill out <i>Initial Statement About an Eviction Judgment Against You</i> (Form 101A) and file it with this bankruptcy petition.</li> </ul>

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Debtor 1 JaTaun		N A:-d-		Robinson-Swopes	Case number (if kno	own)	
First Name  Port 2: Poport About An	v Bus			Last Name			
Part 3: Report About An  12. Are you a sole	у bus	No.	Go to Part 4.	sole Proprietor			
proprietor of any full- or part-time			Name and location of b	pusiness			
business?							
A sole proprietorship is a business you			Name of business, if ar	ny			
operate as an individual, and is not a separate legal			Number	Street			
entity such as a corporation,							
partnership, or LLC.			City		State	Zip Code	
If you have more than one sole proprietorship, use a			Check the appropriate	box to describe you	r business:		
separate sheet and  Health Care Business (as defined in 11 U.S.C. § 101(27A))							
attach it to this Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))							
petition.		Stockbroker (as defined in 11 U.S.C. § 101(53A))					
Commodity Broker (as defined in 11 U.S.C. § 101(6))				U.S.C. § 101(6))			
			None of the above	ve			
13. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11						, statement of
For a definition of small business		No.	I am not filing under Ch				
debtor, see 11 U.S.C. § 101(51D).	Ц	No.	Bankruptcy Code.	er 11, but I am NO I	a small business debtor ad	ccording to the definition	in the
3 10 1(0 1 = 7)	Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.						
Part 4: Report if You Ow	n or	Have A	ny Hazardous Pro	operty or Any P	roperty That Needs	Immediate Attenti	on
14. Do you own or have	<b>V</b>	No.					
any property that poses or is alleged			What is the hazard?				
to pose a threat of imminent and identifiable hazard		I	f immediate attention is r	needed, why is it nee	ded?		
to public health or safety? Or do you		,	Where is the property?				
own any property that needs				Number	Street		
immediate attention?							
For example, do you				City	State	<i>7</i> ir	o Code
own perishable goods, or livestock that must be fed, or a building that needs urgent				,		_,	
repairs?							

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Debtor 1 JaTaun Robinson-Swopes Case number (if known)

#### First Name Middle Name Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling **About Debtor 1:** About Debtor 2 (Spouse Only in a Joint Case): You must check one: You must check one: 15. Tell the court whether you have I received a briefing from an approved credit I received a briefing from an approved credit received briefing counseling agency within the 180 days before I filed counseling agency within the 180 days before I filed about credit this bankruptcy petition, and I received a certificate of this bankruptcy petition, and I received a certificate of counseling. completion. completion. Attach a copy of the certificate and the payment plan, if any, Attach a copy of the certificate and the payment plan, if any, The law requires that that you developed with the agency. that you developed with the agency. you receive a briefing about credit I received a briefing from an approved credit I received a briefing from an approved credit counseling agency within the 180 days before I filed counseling agency within the 180 days before I filed counseling before this bankruptcy petition, but I do not have a this bankruptcy petition, but I do not have a you file for certificate of completion. certificate of completion. bankruptcy. You must truthfully check Within 14 days after you file this bankruptcy petition, Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment you MUST file a copy of the certificate and payment one of the following plan, if any. plan, if any. choices. If you cannot do so, you are I certify that I asked for credit counseling services I certify that I asked for credit counseling services not eligible to file. from an approved agency, but was unable to obtain from an approved agency, but was unable to obtain those services during the 7 days after I made my those services during the 7 days after I made my If you file anyway, request, and exigent circumstances merit a 30-day request, and exigent circumstances merit a 30-day temporary waiver of the requirement. temporary waiver of the requirement. the court can dismiss your case, you will To ask for a 30-day temporary waiver of the requirement, To ask for a 30-day temporary waiver of the requirement, lose whatever filing attach a separate sheet explaining what efforts you made to attach a separate sheet explaining what efforts you made to fee you paid, and obtain the briefing, why you were unable to obtain it before obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances you filed for bankruptcy, and what exigent circumstances your creditors can required you to file this case. required you to file this case. begin collection activities again. Your case may be dismissed if the court is dissatisfied with Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for your reasons for not receiving a briefing before you filed for bankruptcy. bankruptcy. If the court is satisfied with your reasons, you must still If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, the payment plan you developed, if any. If you do not do so, your case may be dismissed. your case may be dismissed. Any extension of the 30-day deadline is granted only for Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. cause and is limited to a maximum of 15 days. I am not required to receive a briefing about credit I am not required to receive a briefing about credit counseling because of: counseling because of: Incapacity. I have a mental illness or a mental Incapacity. I have a mental illness or a mental deficiency that makes me incapable of deficiency that makes me incapable of realizing or making rational decisions realizing or making rational decisions about finances. Disability. My physical disability causes me to be Disability. My physical disability causes me to be unable to participate in a briefing in unable to participate in a briefing in person, by phone, or through the person, by phone, or through the internet, even after I reasonably tried internet, even after I reasonably tried to do so. to do so. Active duty. Active duty. I am currently on active military duty in I am currently on active military duty in a military combat zone. a military combat zone. If you believe you are not required to receive a briefing If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of about credit counseling, you must file a motion for waiver of

credit counseling with the court.

credit counseling with the court.

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Debtor 1 JaTaun First Name		Robinson-Swopes Case number (if kno .ast Name	own)				
	uestions for Reporting Purpos						
16. What kind of debts do you have?	<ul> <li>16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."  No. Go to line 16b.  Yes. Go to line 17.</li> <li>16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.  No. Go to line 16c.  Yes. Go to line 17.</li> <li>16c. State the type of debts you owe that are not consumer debts or business debts.</li> </ul>						
17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	paid that funds will be availa  No.  Yes.	r 7. Go to line 18.  Do you estimate that after any exempt property she to distribute to unsecured creditors?	is excluded and administrative expenses are				
18. How many creditors do you estimate that you owe?	✓ 1-49 ☐ 50-99 ☐ 100-199 ☐ 200-999	1,000-5,000 5,001-10,000 10,001-25,000	☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than 100,000				
19. How much do you estimate your assets to be worth?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion				
20. How much do you estimate your liabilities to be?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion				
Part 7: Sign Below							
For you	and correct.  If I have chosen to file under C 11,12, or 13 of title 11, United 3 choose to proceed under Chap If no attorney represents me a me fill out this document, I hav I request relief in accordance of I understand making a false state.	Chapter 7, I am aware that I may prostates Code. I understand the relief ofter 7.  Ind I did not pay or agree to pay son we obtained and read the notice requivith the chapter of title 11, United Statement, concealing property, or obcase can result in fines up to \$250,052, 1341, 1519, and 3571.	available under each chapter, and I neone who is not an attorney to help uired by 11 U.S.C. § 342(b). tates Code, specified in this petition. taining money or property by fraud in 100, or imprisonment for up to 20				

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Debtor 1 JaTaun		Robinson-Swopes	Case number (if kno	wn)
First Name	Middle Name	Last Name		
For your attorney, if you are represented by one  If you are not represented by an attorney, you do not	eligibility to proceed und the relief available unde to the debtor(s) the notic certify that I have no kno petition is incorrect.	er Chapter 7, 11, 12, or r each chapter for whick ce required by 11 U.S.C.	13 of title 11, United the person is eliging § 342(b) and, in a	I have informed the debtor(s) about ed States Code, and have explained ible. I also certify that I have delivered case in which § 707(b)(4)(D) applies, on in the schedules filed with the
need to file this page.	/s/ Megan Holmes		Date	11/17/2016
1.19	Signature of Attorney for	r Debtor		I/DD/YYYY
	Megan Holmes Printed name  Semrad Law Firm Firm name  11101 S. Western Avenu Street	e		
	Chicago	Illir	nois	60643
	City	Sta		Zip Code
	Contact phone	3128374019	Email address	mholmes@semradlaw.com
			Illinois	
	Bar number	<u> </u>	State	

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Fill in this information to identify your case:							
Debtor 1	JaTaun		Robinson-Swopes				
	First Name	Middle Name	Last Name				
Debtor 2							
(Spouse, if filing) First Name		Middle Name	Last Name				
United States E	Bankruptcy Court for the:	Northern	District of Illinois				
Case number (If known)			(State)				

Check if this is ar
amended filing

12/15

#### Official Form 106Sum

#### **Summary of Your Assets and Liabilities and Certain Statistical Information**

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

Part 1: Summarize Your Assets	
	Your assets Value of what you own
Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B	\$155,475.00
1b. Copy line 62, Total personal property, from Schedule A/B	\$91,010.06
1c. Copy line 63, Total of all property on Schedule A/B	\$246,485.06
Part 2: Summarize Your Liabilities	
	Your liabilities Amount you owe
Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)     2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$37,381.00
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)  3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$341.00
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$32,740.00
Your total liabilities	\$70,462.00
Part 3: Summarize Your Income and Expenses	
4. Schedule I: Your Income (Official Form 106I)  Copy your combined monthly income from line 12 of Schedule I	\$4,340.14
Schedule J: Your Expenses (Official Form 106J)  Copy your monthly expenses from line 22, Column A, of Schedule J	\$2,910.00

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De	btor 1	JaTaun		Robinson-Swopes	Case number (if known	ı)	
		First Name	Middle Name	Last Name			
Par	t 4:	Answer These Questic	ons for Administrative	and Statistical Recor	ds		
6. <b>/</b>	Are yo	u filing for bankruptcy und	er Chapters 7, 11, or 13?				
	□ N	o. You have nothing to report	on this part of the form. Chec	ck this box and submit this form	n to the court with your c	other schedules.	
	<b>✓</b> Ye	es.					
7. <b>\</b>	What I	kind of debt do you have?					
				ebts are those incurred by an i es 8-10 for statistical purpose	, ,	personal,	
		our debts are not primarily is form to the court with your		e nothing to report on this part	of the form. Check this b	ox and submit	
8.		the Statement of Your Cu 122A-1 Line 11; OR, Form 12	-	ppy your total current monthly i -1 Line 14.	ncome from Official		\$6,166.58
9.	Сор	by the following special cate	egories of claims from Par	t 4, line 6 of Schedule E/F:			
	Froi	m Part 4 on Schedule E/F, o	copy the following:		Total clair	m	
	9a. I	Domestic support obligations	(Copy line 6a.)		\$0.00		
	9b. T	Taxes and certain other debts	you owe the government. (Co	ppy line 6b.)	\$341.00		
	9c. (	Claims for death or personal in	njury while you were intoxica	ted. (Copy line 6c.)	\$0.00		
	9d. S	Student loans. (Copy line 6f.)			\$0.00		
		Obligations arising out of a se	paration agreement or divor	ce that you did not report as	\$0.00		
		rity claims. (Copy line 6g.)  Debts to pension or profit-shar	ring plans, and other similar	debts. (Copy line 6h.)	\$0.00		
	9g. <sup>-</sup>	Total. Add lines 9a through 9	f.		\$341.00		

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Debtor 1	In Taxan					
<u>.</u> !!	JaTaun			Robinson-Swopes		
i	First Name	Middle N	Name	Last Name		
Debtor 2						
(Spouse, i	if filing) First Name	Middle N	Name	Last Name		
United Sta	ates Bankruptcy Court for the:	Northern		District of Illinois		
Case num	nber			(State)		
(If known)						
Officia	al Form 106A/B					Check if this is an amended filing
Sche	dule A/B: Prop	ertv				12 <i>/</i> -
category v responsib write your	where you think it fits best. I ble for supplying correct info name and case number (if I	Be as complete and ormation. If more senown). Answer ev	d accur space is ery que	et only once. If an asset fits in more that ate as possible. If two married people is needed, attach a separate sheet to the stion.  or Other Real Estate You Own	are filing together, both are is form. On the top of any a	equally dditional pages,
1. Do you	u own or have any legal or e	quitable interest ir	any re	sidence, building, land, or similar prop	erty?	
П	No. Go to Part 2		-	<u>-</u>		
	Yes. Where is the property?					
1.1	Street address, if available, of 15825 Albany Ave.  Number Street	or other description	Sin Du	is the property? Check all that apply.  Ingle-family home  Uplex or multi-unit building  Condominium or cooperative	the amount of any secure Creditors Who Have Cla Current value of the entire property?	laims or exemptions. Put ed claims on Schedule D: hims Secured by Property. Current value of the portion you own?
		00.100		anufactured or mobile home	<u>\$155475.00</u>	\$155475.00
	Markham Illinois City State	60428 Zip Code		nd rectment property	Describe the nature of	vour ownership
		p		restment property meshare	interest (such as fee si	mple, tenancy by
	Cook County	_		her	the entireties, or a life	estate), if known.
			Who lone.  De lone At	has an interest in the property? Check betor 1 only betor 2 only betor 1 and Debtor 2 only least one of the debtors and another information you wish to add about thi crty identification number: 28-13-326-00	s item, such as local	
If you	own or have more than one, lis	t here:				
1.2	Street address, if available, o	or other description	Sill Sill Sill Sill Sill Sill Sill Sill	is the property? Check all that apply.  Ingle-family home  Uplex or multi-unit building  Indominium or cooperative  Ingle that apply.	the amount of any secure	laims or exemptions. Put ed claims on Schedule D: nims Secured by Property.  Current value of the portion you own?
	Number Street			estment property	Describe the nature of	
				meshare	interest (such as fee si the entireties, or a life	mple, tenancy by estate), if known.
	City State	Zip Code	Ħ°	her		
			one.	has an interest in the property? Check bettor 1 only bettor 2 only bettor 1 and Debtor 2 only	Check if this is co (see instructions)	

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Debto		Robinson-Swopes Case numbe	r (if known)	
	First Name Middle Name	Last Name		
- - !	Street address, if available, or other description  Number Street  City State Zip Code	What is the property? Check all that apply.  Single-family home  Duplex or multi-unit building  Condominium or cooperative  Manufactured or mobile home  Land Investment property  Timeshare Other	Do not deduct secured classes amount of any secure Creditors Who Have Classes Current value of the entire property?  Describe the nature of interest (such as fee sin the entireties, or a life of the entireties).	d claims on Schedule D: ims Secured by Property.  Current value of the portion you own?  your ownership mple, tenancy by
		Who has an interest in the property? Check one.  Debtor 1 only  Debtor 2 only  Debtor 1 and Debtor 2 only  At least one of the debtors and another  Other information you wish to add about this item	Check if this is con (see instructions)	nmunity property
		property identification number:		
		or all of your entries from Part 1, including any entrie here		475.00
you ow	own, lease, or have legal or equitable interenthat someone else drives. If you lease a vehicle, vans, trucks, tractors, sport utility vehicles, moto No	st in any vehicles, whether they are registered or not, also report it on Schedule G: Executory Contracts and Un prcycles		
<b>✓</b>	Yes .1 Make <u>Dodge</u> Grand	Who has an interest in the property? Check one.	Do not deduct secured cl the amount of any secure	•
	Model: <u>Caravan</u> Year: 2005	Debtor 1 only		ims Secured by Property.
	Approximate mileage: 179000  Other information: 2005 Dodge Grand Caravan	Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see	Current value of the entire property? \$2900.00	Current value of the portion you own? \$2900.00
3	.2 Make <u>Chrysler</u> Town &  Model: <u>Country</u> Year: 2015	instructions)  Who has an interest in the property? Check one.  Debtor 1 only	Do not deduct secured cl the amount of any secure Creditors Who Have Cla	d claims on Schedule D: ims Secured by Property.
	Approximate mileage: 31099  Other information: 2015 Chrysler Town & Country	Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions)	Current value of the entire property? \$22300.00	Current value of the portion you own? \$22300.00

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Debtor 1 only   Current value of the entire property?   Current value of the entire property?   Debtor 2 only   At least one of the debtors and another   Check if this is community property (see instructions)   Debtor 1 only   Current value of the entire property?   Do not deduct secured claims or exemptions. Put the amount of any secured claims or exemptions. Put the amount of any secured claims or exemptions. Put the amount of any secured claims or exemptions. Put the amount of any secured claims or exemptions. Put the amount of any secured of the entire property?   Debtor 2 only   Current value of the entire property?   Debtor 1 and Debtor 2 only   Debtor 1 and Debtor 2 only   Debtor 1 only   Debtor 2 only   Debtor 2 only   Debtor 2 only   Debtor 3 only   Debtor 2 only   Debtor 3 only   Debtor 3 only   Debtor 3 only   Debtor 3 only   Debtor 4 only   Debtor 4 only   Debtor 5 only   Debtor 5 only   Debtor 6 only   Debtor 6 only   Debtor 8 only   Debtor 9 on	3.3	First Name Middle N	Name Last Name		
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Debtor 1 JaTaun Robinson-Swopes Case number (if known) First Name Middle Name Part 3: **Describe Your Personal and Household Items** Current value of the Do you own or have any legal or equitable interest in any of the following items? portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware Yes. Describe... Used Furniture \$600.00 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music Yes. Describe... 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles **√** No Yes. Describe... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments **√** No Yes. Describe... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment **√** No Yes. Describe... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories ✓ Yes. Describe... Misc. Clothing \$250.00 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver □l No ✓ Yes. Describe... Costume Jewelry \$150.00 13. Non-farm animals Examples: Dogs, cats, birds, horses **✓** No Yes. Describe... 14. Any other personal and household items you did not already list, including any health aids you did not list **√** No Yes. Describe... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$1500.00 for Part 3. Write that number here

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Debtor 1 JaTaun Robinson-Swopes Case number (if known) First Name Middle Name Last Name **Describe Your Financial Assets** Part 4: Current value of the Do you own or have any legal or equitable interest in any of the following? portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition Yes ..... Cash: ..... 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. Institution name: ✓ Yes 17.1. Checking account: 17.2. Checking account: 17.3. Savings account: Chase \$310.00 17.4. Savings account: Central Credit Union \$1000.00 17.5. Certificates of deposit: 17.6. Other financial account: 17.7. Other financial account: 17.8. Other financial account: 17.9. Other financial account: 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts **✓** No Institution or issuer name: Yes 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture **✓** No Name of entity % of ownership: Yes. Give specific information about them

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Deb	tor 1	JaTaun First Name	Middle Name	Robinson-Swopes	Case number (if known)	
20.	Neg	vernment and corportiable instruments in	orate bonds and other negotial nelude personal checks, cashiers' onts are those you cannot transfer to	checks, promissory notes, and mo	oney orders.	
		No Yes. Give specific information about them	Issuer name:			
21.			accounts A, ERISA, Keogh, 401(k), 403(b),	thrift savings accounts, or other p	pension or profit-sharing plans	
		No Yes. List each	Type of account:	Institution name:		
	Y	account	401(k) or similar plan:	401K - IL Department of Human	Services	\$60000.00
		separately.	Pension plan:			
			IRA:			•
			Retirement account:			
			Keogh:			
			Additional account:			-
			Additional account:			
22.	You Exa	curity deposits and programmers of all unused of all unused of amples: Agreements of the apanies, or others  No	orepayments deposits you have made so that you with landlords, prepaid rent, public	a may continue service or use from utilities (electric, gas, water), telectric function name:	a company communications	
		Yes	Electric:			
			Gas:	_		
			Heating oil:			
			Security deposit on rental unit:			
			Prepaid rent:			
			Telephone:			
			Water:			
			Rented furniture:			-
			Other:			
23.	Anı	nuities (A contract for	a periodic payment of money to y	ou, either for life or for a number of	f years)	•
	<b>✓</b>	No Yes	Issuer name and description:			

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Debt	or 1 <u>JaTaun</u> First Name	Middl	Robinson-Swopes le Name Last Name	Case number (if known)	
24.	Interests in a	n education IRA, in an ac	count in a qualified ABLE program, or und	er a qualified state tuition program	
		530(b)(1), 529A(b), and 529	9(D)(1).		
	✓ No Yes	Institution name and descri	iption. Separately file the records of any interests	s.11 U.S.C. § 521(c):	
25.		able or future interests in or your benefit	property (other than anything listed in line	1), and rights or powers	
	<b>✓</b> No				
	Yes. Desc	cribe			
					1
26.		<del>-</del>	e secrets, and other intellectual property es, proceeds from royalties and licensing agreer	ments	
	<b>✓</b> No				
	Yes. Desc	cribe			
27.		nchises, and other general ding permits, exclusive lice	al intangibles enses, cooperative association holdings, liquor l	icenses, professional licenses	
	<b>✓</b> No				
	Yes. Desc	ribe			
Mor	ney or prope	erty owed to you?			Current value of the
					portion you own?  Do not deduct secured
28.	Tax refunds o	wed to you			-
28.	Tax refunds o	wed to you			Do not deduct secured
28.	✓ No  Yes. Give s	specific information		Federal:	Do not deduct secured
28.	No Yes. Give sabou			Federal: State:	Do not deduct secured claims or exemptions.
28.	✓ No  Yes. Give s abou you a	specific information t them, including whether			Do not deduct secured claims or exemptions.  \$0.00
	✓ No  Yes. Give s abou you a and t	specific information t them, including whether Ilready filed the returns he tax years	spousal support, child support, maintenance, div	State: Local:	Do not deduct secured claims or exemptions.  \$0.00 \$0.00
	Yes. Give s abou you a and t  Family suppoint Examples: Past	specific information t them, including whether Ilready filed the returns he tax years	spousal support, child support, maintenance, dive	State: Local:	Do not deduct secured claims or exemptions.  \$0.00 \$0.00
	Yes. Give s abou you a and t  Family support Examples: Past	specific information t them, including whether Ilready filed the returns he tax years rt due or lump sum alimony, s	spousal support, child support, maintenance, dive	State: Local:	Do not deduct secured claims or exemptions.  \$0.00 \$0.00
	Yes. Give s abou you a and t  Family support Examples: Past	specific information t them, including whether Ilready filed the returns he tax years	spousal support, child support, maintenance, dive	State: Local:  Droce settlement, property settlement	Do not deduct secured claims or exemptions.  \$0.00 \$0.00 \$0.00
	Yes. Give s abou you a and t  Family support Examples: Past	specific information t them, including whether Ilready filed the returns he tax years rt due or lump sum alimony, s	spousal support, child support, maintenance, dive	State: Local:  Drice settlement, property settlement  Alimony:	Do not deduct secured claims or exemptions.  \$0.00 \$0.00 \$0.00 \$0.00
	Yes. Give s abou you a and t  Family support Examples: Past	specific information t them, including whether Ilready filed the returns he tax years rt due or lump sum alimony, s	spousal support, child support, maintenance, dive	State: Local:  Drice settlement, property settlement  Alimony:  Maintenance:	Do not deduct secured claims or exemptions.  \$0.00 \$0.00 \$0.00 \$0.00
	Yes. Give s abou you a and t  Family support Examples: Past	specific information t them, including whether Ilready filed the returns he tax years rt due or lump sum alimony, s	spousal support, child support, maintenance, dive	State: Local:  Drice settlement, property settlement  Alimony: Maintenance: Support: Divorce settlement:	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
29.	✓ No  Yes. Give s abou you a and t  Family suppor Examples: Past ✓ No  Yes. Give s	specific information t them, including whether llready filed the returns he tax years  rt due or lump sum alimony, s specific information		State: Local:  Divorce settlement, property settlement  Alimony: Maintenance: Support: Divorce settlement: Property settlement:	Do not deduct secured claims or exemptions.  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
29.	✓ No  Yes. Give s abou you a and t  Family suppor Examples: Past ✓ No  Yes. Give s  Other amount Examples: Unp	specific information t them, including whether llready filed the returns he tax years  t due or lump sum alimony, s specific information	nce payments, disability benefits, sick pay, vacati	State: Local:  Divorce settlement, property settlement  Alimony: Maintenance: Support: Divorce settlement: Property settlement:	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
29.	✓ No  Yes. Give s abou you a and t  Family suppor Examples: Past ✓ No  Yes. Give s  Other amount Examples: Unp	specific information t them, including whether llready filed the returns he tax years  t due or lump sum alimony, s specific information		State: Local:  Divorce settlement, property settlement  Alimony: Maintenance: Support: Divorce settlement: Property settlement:	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
29.	✓ No  Yes. Give s abou you a and t  Family suppoi Examples: Past ✓ No  Yes. Give s  Other amount Examples: Unp Soc	specific information t them, including whether liready filed the returns he tax years  t due or lump sum alimony, s specific information	nce payments, disability benefits, sick pay, vacati	State: Local:  Divorce settlement, property settlement  Alimony: Maintenance: Support: Divorce settlement: Property settlement:	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00

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Deb	otor 1 JaTaun	Robinson-Swopes	Case number (if known)	
	First Name Middle Name	e Last Name		
31.	Interests in insurance policies  Examples: Health, disability, or life insurance; he	ealth savings account (HSA); credit, home	owner's, or renter's insurance	
	<ul><li>No</li><li>✓ Yes. Name the insurance company</li></ul>	Company name:	Beneficiary:	Surrender or refund value:
	of each policy and list its value	Life Insurance Co. of Texas		\$3000.00
32.	Any interest in property that is due you from If you are the beneficiary of a living trust, expect property because someone has died.		e currently entitled to receive	
	<b>✓</b> No			
	Yes. Describe			
33.	Claims against third parties, whether or not Examples: Accidents, employment disputes, inst		and for payment	
	✓ No			
	Yes. Describe			
34.	Other contingent and unliquidated claims of to set off claims	f every nature, including counterclain	s of the debtor and rights	
	✓ No  Yes. Describe			
	Tes. Describe			
35.	Any financial assets you did not already list			
	✓ No			
	Yes. Describe			
				<b>F</b>
36.	Add the dollar value of all of your entries fro	om Part 4. including any entries for pag	es vou have attached	#C4240.0C
	for Part 4. Write that number here			\$64310.06
Part				in Part 1.
37.		terest in any business-related property		urrent value of the
	No. Go to Part 6.		po	ortion you own?
	Yes. Go to line 38.			o not deduct secured claims exemptions
38.	Accounts receivable or commissions you alr	eady earned	O	exemptions
	✓ No	•		
	Yes. Describe			
30	Office equipment, furnishings, and supplies	•		
J9.	Examples: Business-related computers, software		s, rugs, telephones, desks, chairs, electro	nic devices
	√ No			
	Yes. Describe			
	_			
1				

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Deb	tor 1 JaTaun	Robinson-Swopes Case number (if known)	
40.	First Name  Machinery fixtures ec	Middle Name Last Name quipment, supplies you use in business, and tools of your trade	
40.		quipment, supplies you use in business, and tools of your trade	
	✓ No  Yes. Describe		
	Teo. Describe		
41.	Inventory		
	✓ No		
	Yes. Describe		
42.	Interests in partnersh	ips or joint ventures	
	✓ No	Name of entity: % of ownership:	
	Yes. Give specific	rvaine of entity. 78 of ownership.	
	information about them		
43. (	Customer lists, mailing	lists, or other compilations	
	✓ No		
	Yes. Do your lists in	clude personally identifiable information (as defined in 11 U.S.C. § 101(41A))?	
	□ No		
	Yes. Desc	ribe	
44	Amy hypinasa valatad	property year alid not already liet	
44.		property you did not already list	
	✓ No		
	Yes. Give specific information		
			<u> </u>
			<u> </u>
		Ill of your entries from Part 5, including any entries for pages you have attached r here	
Part		Farm- and Commercial Fishing-Related Property You Own or Have an Interest In n interest in farmland, list it in Part 1.	•
46.	Do you own or have a	any legal or equitable interest in any farm- or commercial fishing-related property?	
	✓ No. Go to Part 7.		Current value of the
	Yes. Go to line 47.		portion you own?  Do not deduct secured
	_		claims
47	Farms and a state		or exemptions
47.	Farm animals  Examples: Livestock, po	oultry, farm-raised fish	
	<b>√</b> No		
	Yes. Describe		
	123. 2000		

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Debi	tor 1 <u>JaTaun</u> First Name	Middle Name	Robinson-Swopes Last Name	Case number (if known)	
48.		owing or harvested	Last Name		
<del>-10.</del>	_	owing of harvested			
	✓ No  Yes. Describ				
	res. Describ	e			
	-				
49.	Farm and fishin	g equipment, implements, machinery, fix	tures, and tools of trade		
	<b>✓</b> No				
	Yes. Describ	e			
50.	Farm and fishin	g supplies, chemicals, and feed			
	<b>✓</b> No				
	Yes. Describ	e			
51.	Any farm- and c	ommercial fishing-related property you d	id not already list		
	<b>✓</b> No				
	Yes. Describ	e			
		ue of all of your entries from Part 6, incluc umber here			
				L	
Part	7: Describe	All Property You Own or Have an	Interest in That You	Did Not List Above	
53.		ner property of any kind you did not alread	dy list?		
		n tickets, country club membership			
	✓ No				
	Yes. Give spe	ecific			
	monnation				
54. A	dd the dollar valu	ue of all of your entries from Part 7. Write	that number here	<b>&gt;</b>	
Part	8: List the To	otals of Each Part of this Form			
					\$455475 OO
55. <b>F</b>	Part 1: Total real e	estate, line 2		······	\$155475.00
56. <b>p</b>	part 2 total vehicle	es, line 5	\$25200.00		
57. <b>P</b>	art 3: Total perso	onal and household items, line 15	-	_	
	•	cial assets, line 36	\$1500.00	_	
			\$64310.06	_	
59. <b>F</b>	Part 5: Total busir	ness-related property, line 45		_	
60. <b>F</b>	Part 6: Total farm	- and fishing-related property, line 52		_	
61. <b>F</b>	Part 7: Total other	r property not listed, line 54		_	
62. <b>1</b>	Total personal pro	operty. Add lines 56 through 61	\$91010.06	_	+ \$91010.06
	~		ψο το το.οο	Copy personal property total ►	1 φ01010.00
					\$246485.06
63. <b>T</b>	otal of all propert	ty on Schedule A/B. Add line 55 + line 62			

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Debtor 1 JaTaun		Robinson-Swopes	Case number (if known)							
First Name	Middle Name	Last Name								
Schedule A/B: Property. Additional page										
Part 3: Describe Your Pe	ersonal and Household	l Items								
Do you own or have an	y legal or equitable int	erest in any of the follo	wing items?	Current value of the portion you own?						
				Do not deduct secured claims or exemptions.						
6.2. Household goods and f	urnishings									
No										

\$500.00

✓ Yes. Describe...

Bedroom Set

Official Form 106A/B Schedule A/B: Property page 11

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Fill in this information to identify your case:						
Debtor 1	JaTaun		Robinson-Swopes			
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse, if filing	ng) First Name	Middle Name	Last Name			
United States	Bankruptcy Court for the:	Northern	District of Illinois			
			(State)			
Case number (If known)						

#### Official Form 106C

#### Check if this is an amended filing

#### Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Par	t 1: Identify the Property You Claim	im as Exempt					
1. 2.	Which set of exemptions are you claiming? Check one only, even if your spouse is filling with you.  ✓ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)  ✓ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)  For any property you list on Schedule A/B that you claim as exempt, fill in the information below.						
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own  Copy the value from Schedule A/B	Amount of the exemption you claim  Check only one box for each exemption.	Specific laws that allow exemption			
	Brief description: 28-13-326-006-0000 Line from Schedule A/B: 01 Brief description:	\$155,475.00 \$250.00	\$15,000.00  100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-901  735 ILCS 5/12-1001(a)			
	Misc. Clothing Line from Schedule A/B:11		100% of fair market value, up to any applicable statutory limit	_			
3.	Are you claiming a homestead exemptio (Subject to adjustment on 4/01/19 and every  No Yes. Did you acquire the property covere No Yes	3 years after that for ca					

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JaTaun Robinson-Swopes Debtor 1 Case number (if known) First Name Middle Name Last Name **Additional Page** Part 2: Brief description of the property and **Current value of** Specific laws that allow exemption Amount of the exemption you claim line on Schedule A/B that lists this the portion you Check only one box for each exemption. property own Copy the value from Schedule A/B 735 ILCS 5/12-1001(b) Brief \$600.00 **V** description: \$600.00 **Used Furniture** 100% of fair market value, up to any applicable statutory limit Schedule A/B: 06 735 ILCS 5/12-1001(b) Brief \$0.06 description: \$0.06 Chase 100% of fair market value, up to any Line from applicable statutory limit 17 Schedule A/B: Brief 735 ILCS 5/12-1001(b) \$310.00 description: \$310.00 Chase 100% of fair market value, up to any Line from applicable statutory limit Schedule A/B: 17 735 ILCS 5/12-1001(b) Brief \$1,000.00 description: ◪ \$1,000.00 **Central Credit Union** 100% of fair market value, up to any Line from applicable statutory limit Schedule A/B: Brief 735 ILCS 5/12-1001(f) \$3,000.00 description: \$3,000.00 Life Insurance Co. of 100% of fair market value, up to any **Texas** applicable statutory limit Line from Schedule A/B: 735 ILCS 5/12-704 \$60,000.00 **V** description: \$60,000.00 401K - IL Department of 100% of fair market value, up to any **Human Services** applicable statutory limit Line from Schedule A/B: 21 735 ILCS 5/12-1001(b) Brief \$150.00 description: **✓** \$150.00 Costume Jewelry 100% of fair market value, up to any Line from applicable statutory limit Schedule A/B: Brief 735 ILCS 5/12-1001(c) \$2,900.00 **V** description: \$2,400.00 **Dodge Grand Caravan,** 100% of fair market value, up to any 2005, 2005 Dodge Grand applicable statutory limit Caravan Line from Schedule A/B: 03 735 ILCS 5/12-1001(b) Brief \$22,300.00 **V** description: \$0 Chrysler Town & 100% of fair market value, up to any Country, 2015, 2015 applicable statutory limit Chrysler Town & Country Of Britishe Florem A/186C Schedule C: The Property You Claim as Exempt 03 page 2

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Fill in	this information to identify your case:			_	735 ILCS 5/12-1	1001(b)
(	description:	Ψουο.ου	Pakinaan Suuanaa \$0			
	Or 1 Bedrook በ Self Self First Name	Middle Name	Robinson Swopes 100 Cot tair market value, u	p to any		
	Line from Stratific Schedule A/B: 06		applicable statutory limit			
(Spot	use, if filing) First Name	Middle Name	Last Name			
Unite	d States Bankruptcy Court for the:	Northern	District of Illinois (State)			
Case (If kno	number own)		(Citale)			
Off	icial Form 106D					Check if this is a
	hedule D: Credite	ors Who Hav	e Claims Secur	ed by Pro		amended filing 12/1
Be as space and ca	complete and accurate as possible is needed, copy the Additional Paase number (if known).	e. If two married people ange, fill it out, number the	re filing together, both are equal	ly responsible for s	upplying correct infor	
1.	Do any creditors have claims secu					
		•	other schedules. You have nothing	else to report on this t	orm.	
	Yes. Fill in all of the information b	elow.				
Part	1: List All Secured Claims					
2.	List all secured claims. If a creditor for each claim. If more than one cred much as possible, list the claims in a	ditor has a particular claim, li	st the other creditors in Part 2. As	Column A  Amount of claim  Do not deduct the value of collateral.	Column B  Value of collateral that supports this claim	Column C Unsecured portion If any
2.1	GM Financial	Describe the property th	at secures the claim:	\$27,154.00	\$22,300.00	\$4,854.00
	Creditor's Name PO 183834	2015 Chrysler Town & Cou				
	Number Street		e claim is: Check all that apply.			
		Contingent				
	Arlington Texas 76096 City State ZIP Code	Unliquidated				
	Who owes the debt? Check one.	Disputed				
	Debtor 1 only	Nature of lien. Check all t	hat apply.			
	Debtor 2 only Debtor 1 and Debtor 2 only	car loan)	de (such as mortgage or secured			
	At least one of the debtors and	= '	tax lien, mechanic's lien)			
	another  Chack if this claim relates	Judgment lien from a l				
	Check if this claim relates to a community debt	Other (including a righ	t to offset)			
	Date debt was 1/1/2015 incurred	Last 4 digits of account	number 6726			
2.2	SYNCB/VALUEC Creditor's Name	Describe the property th	at secures the claim:	\$1,227.00	\$500.00	\$727.00
	C/O PO BOX 965036	Furniture - Credit Card				
	Number Street	As of the date you file, the Contingent	e claim is: Check all that apply.			
	ODI ANDO Florido 22006	Unliquidated				
	ORLANDO Florida 32896 City State ZIP Code	Disputed				
	Who owes the debt? Check one.	Nature of lien. Check all t	hat apply			
	Debtor 1 only		11.7			
	Debtor 2 only  Debtor 1 and Debtor 2 only	car loan)	de (such as mortgage or secured			
	At least one of the debtors and	Statutory lien (such as	tax lien, mechanic's lien)			
	another	Judgment lien from a l				
	Check if this claim relates to a community debt Date debt was 12/1/2013	Other (including a right				
	incurred					
	Add the dollar value of y number here:	our entries in Column A	on this page. Write that	\$28,381.00		

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Debto		JaTaun		Robinson-Swopes	Case r	number (if known)		
	F	irst Name M	iddle Name	Last Name	_			
Pa	rt:1	Additional Page				Column A	Column B	Column C
i ait. i		2.4, and so form.		Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any		
2.3	Chic City Who	c County Clerk itor's Name N Clark St FI 4 umber Street  sago Illinois 60602 State ZIP Code o owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt	T5825 Albany Ave.,   As of the date you   Contingent   Unliquidated   Disputed   Disputed   Nature of lien. Che   An agreement   car loan   Statutory lien (statutory lien for the disputation)   Judgment lien for the disputation   Statutory lien (statutory lien for the disputation)   Statutory lien for the disputation   Sta	eck all that apply.  you made (such as mortgage	that apply.	\$9,000.00	\$155,475.00	\$0.00
		debt was	Last 4 digits of ac	count number				
		Add the dollar value of you here:	ur entries in Colum	n A on this page. Write th	at number	\$9,000.00	-	
		If this is the last page of you	our form, add the do	ollar value totals from all p	oages.	\$37,381.00	-	

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Debtor 1 Part 2:	JaTaun First Name List Others to Be No	Middle Name  otified for a Debt That	Robinson-Swopes Last Name t You Already Listed	Case number (if known)
agency you ha	is trying to collect from ve more than one creditory	you for a debt you owe to	someone else, list the creditor it you listed in Part 1, list the ad	at you already listed in Part 1. For example, if a collection in Part 1, and then list the collection agency here. Similarly, if Iditional creditors here. If you do not have additional
Cook County Assessor Name 118 North Clark Street Third Floor, Room #320 Number Street			th line in Part 1 did you enter the creditor?	
<u>Chi</u>	3 -	Illinois 60602 State Zip Co	<u> </u>	

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Fill in this	s information to identify your ca	se:				
Debtor 1			Robinson-Swopes			
<b>D</b> 1 4 0	First Name	Middle Name	Last Name			
Debtor 2 (Spouse,	; if filing) First Name	Middle Name	Last Name			
United S	states Bankruptcy Court for the:	Northern	District of Illinois (State)			
Case nui						
Offici	al Form 106E/F			Ch	eck if this is a	ın amended filin
Sch	edule E/F: Cr	editors Who	Have Unsecured Clain	าร		12/1
that are lientries in known).  Part 1:  1. Do  2. Liss in the lister must be considered as a list of the list of t	isted in Schedule D: Creditor the boxes on the left. Attack the boxes on the left. Attack List All of Your PRIOR any creditors have priority under No. Go to Part 2.  Yes.  It all of your priority unsecured, identify what type of claim it ch as possible, list the claims intinuation Page of Part 1. If months in the second of the property of the page of the priority under the property of the priority under the p	ITY Unsecured Claims against a creditor has is. If a creditor has is. If a claim has both priorit a alphabetical order according than one creditor holds a creditor holds.		r separately for e	ed, fill it out, it e and case n each claim. Fo d nonpriority a claims, fill out	or each claim amounts. As
				Total claim	Priority amount	Nonpriority amount
	S1	L:	ast 4 digits of account number	\$341.00	\$341.00	\$0.00
	iority Creditor's Name D Box 7346	V	When was the debt incurred?			
Nu	umber Street	Α	s of the date you file, the claim is: Check all that app	ly.		
			Contingent			
	niladelphia Pennsylvar		Unliquidated			
Ci <b>W</b>	ty State 'ho incurred the debt? Chec	Zip Code k one.	Disputed			
i Z			pe of PRIORITY unsecured claim:			
	Debtor 2 only		Domestic support obligations			
	Debtor 1 and Debtor 2 only	Ū.	Taxes and certain other debts you owe the government	nt		
	At least one of the debtors an	nd another	Claims for death or personal injury while you were			
Ē	Check if this claim relates debt	to a community	intoxicated Other. Specify			
Is	the claim subject to offset?					
<b>✓</b>	No					
	Yes					

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Debto		binson-Swopes Case number (if known)	
Part 2			
3. I	Do any creditors have nonpriority unsecured claims against yo  No. You have nothing to report in this part. Submit this form to the		
	✓ Yes.	o court with your outer conocutios.	
		I order of the creditor who holds each claim. If a creditor has more	than one priority
		claim listed, identify what type of claim it is. Do not list claims already in	
	•	ers in Part 3.If you have more than four priority unsecured claims fill out the	he Continuation
ŀ	Page of Part 2.		
	Advented Llema Lleable Consisses		Total claim
4.1	Advocate Home Health Services Nonpriority Creditor's Name	- Last 4 digits of account number	\$200.00
	701 Lee St Suite 720 Number Street	When was the debt incurred?n/a	
	Number Street	As of the date you file, the claim is: Check all that apply.	
		Contingent	
	Des Plaines Illinois 60016	Unliquidated	
	City State Zip Code	Disputed	
	Who incurred the debt? Check one.  Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	Student loans	
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce	
	At least one of the debtors and another	that you did not report as priority claims	
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	✓ Other. Specify	
	✓ No		
	Yes		
4.2	CAP ONE NA	- Last 4 digits of account number 3199	\$713.00
	Nonpriority Creditor's Name 1680 Capital One Drive	When was the debt incurred? 6/1/2008	
	Number Street		
		As of the date you file, the claim is: Check all that apply.	
		Contingent	
	Mc Lean Virginia 22102 City State Zip Code	Unliquidated	
	Who incurred the debt? Check one.	Disputed	
	Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	Student loans	
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar	
	Check if this claim relates to a community debt	debts  ✓ Other. Specify <u>CreditCard</u>	
	Is the claim subject to offset?	V Otroi. Spoony Ordanodra	
	Yes		
42	CAPITAL ONE		\$452.00
4.3	Nonpriority Creditor's Name	- Last 4 digits of account number 4051	\$452.00
	p.o. box 3001 Number Street	When was the debt incurred? 5/1/2007	
	c/o shraddha bharatia	As of the date you file, the claim is: Check all that apply.	
	Malvern Pennsylvania 19355	Contingent	
	City State Zip Code	Unliquidated	
	Who incurred the debt? Check one.  Debtor 1 only	Disputed	
	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only	Student loans	
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar	
	Is the claim subject to offset?	debts	
	✓ No	✓ Other. Specify <u>CreditCard</u>	
	Yes		

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Debtor 1 JaTaun Robinson-Swopes Case number (if known) First Name Middle Name Your NONPRIORITY Unsecured Claims - Continuation Page Part 2: After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** CAPITAL ONE AUTO FINAN 4.4 \$2,164.00 Last 4 digits of account number \_ Nonpriority Creditor's Name 3901 DALLAS PKWY When was the debt incurred? 3/1/2012 Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated **PLANO** Texas 75093 City State Zip Code ✓ Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt 074 Automobile Other. Specify \_ Is the claim subject to offset? ✓ No Yes cb/carson \$1,559.00 Last 4 digits of account number 0923 Nonpriority Creditor's Name PO BOX 15521 When was the debt incurred? 5/1/2013 Number Street As of the date you file, the claim is: Check all that apply. Contingent Wilmington 19805 Delaware Unliquidated Zip Code City State Who incurred the debt? Check one. Disputed Debtor 1 only IVI Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Is the claim subject to offset? ✓ Other. Specify CreditCard **✓** No Yes CB/ROAMANS \$225.00 Last 4 digits of account number Nonpriority Creditor's Name P O Box 659728 When was the debt incurred? 3/1/2015 Number Street As of the date you file, the claim is: Check all that apply. Contingent San Antonio 78265 Texas Unliquidated State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Is the claim subject to offset? Other. Specify CreditCard **✓** No

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Debtor 1 JaTaun Robinson-Swopes Case number (if known) First Name Middle Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** CREDITONEBNK 4.7 \$2,112.00 Last 4 digits of account number Nonpriority Creditor's Name PO BOX 98872 When was the debt incurred? 3/1/2006 Number As of the date you file, the claim is: Check all that apply. Contingent LAS VEGAS 89193 Nevada Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Is the claim subject to offset? CreditCard Other. Specify\_ **✓** No Yes **GLOBAL NETWK** 4.8 \$1,501.00 Last 4 digits of account number Nonpriority Creditor's Name 5320 COLLEGE BLVD When was the debt incurred? 10/1/2010 Number As of the date you file, the claim is: Check all that apply. Contingent SHAWNEE Kansas 66211 Unliquidated **MISSIO** Zip Code City State Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt UnknownLoanType Other. Specify Is the claim subject to offset? **✓** No Yes KOHLS/CAPITAL ONE \$216.00 Last 4 digits of account number \_\_\_\_ Nonpriority Creditor's Name N56w17000 Ridgewood Dr When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent Menomonee Falls Wisconsin 53051 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Ⅵ Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Check if this claim relates to a community debt Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offset? Other. Specify \_ CreditCard **✓** No

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Debtor 1 JaTaun Robinson-Swopes Case number (if known) First Name Middle Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** RECEIVABLES PERFORMANC 4.10 \$252.00 Last 4 digits of account number Nonpriority Creditor's Name 20816 44th Avenue W When was the debt incurred? 7/1/2016 Street Number As of the date you file, the claim is: Check all that apply. Contingent 98036 Lynnwood Washington Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Is the claim subject to offset? **✓** 001 Collection; Collecting for **✓** No ORIGINAL CREDITOR: AT T Other. Specify WIRELINE Yes SEARS/CBNA 4.11 \$4,127.00 Last 4 digits of account number Nonpriority Creditor's Name PO BOX 6282 When was the debt incurred? 6/1/2014 Number Street As of the date you file, the claim is: Check all that apply. Contingent South Dakota 57117 SIOUX FALLS Unliquidated City Zip Code State Who incurred the debt? Check one. Disputed Debtor 1 only **|~**| Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Is the claim subject to offset? CreditCard ✓ Other. Specify **✓** No Yes 4.12 SPRINGLEAF FINANCIAL S \$9,686.00 Last 4 digits of account number \_ Nonpriority Creditor's Name 601 NW second street When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent Evansville Indiana 47708 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Is the claim subject to offset? ✓ Other. Specify \_ 048 InstallmentLoan **✓** No

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Debtor 1 JaTaun Robinson-Swopes Case number (if known) First Name Middle Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** SYNCB/CARECR 4.13 \$609.00 Last 4 digits of account number Nonpriority Creditor's Name PO Box 960061 When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent 32896 Orlando Florida Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Is the claim subject to offset? ✓ Other. Specify CreditCard **✓** No Yes SYNCB/JCP 4.14 \$1,993.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? PO BOX 965007 2/1/2012 Number As of the date you file, the claim is: Check all that apply. Contingent **ORLANDO** 32896 Florida Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Is the claim subject to offset? CreditCard ✓ Other. Specify **✓** No Yes 4.15 SYNCB/WALMAR \$3,248.00 Last 4 digits of account number \_ Nonpriority Creditor's Name PO BOX 965024 When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent **EL PASO** Texas Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Is the claim subject to offset? ✓ Other. Specify \_ CreditCard **✓** No

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Debtor	1 <u>Jalaun</u>	Robinson-Swopes Case number (if known)	
	First Name Middle Name	Last Name	
Part 2:	Your NONPRIORITY Unsecured Claims - Con	itinuation Page	
	After listing any entries on this page, number them begin	nning with 4.5, followed by 4.6, and so forth.	Total claim
4.16	THD/CBNA	Last 4 digits of account number 7314	\$3,683.00
	Nonpriority Creditor's Name P.O. Box 105972	When was the debt incurred? 12/1/2014	
	Number Street	When was the debt incurred:	
		As of the date you file, the claim is: Check all that apply.	
		Contingent	
	Atlanta Georgia 30348 City State Zip Code	Unliquidated	
	Who incurred the debt? Check one.	Disputed	
	Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	Student loans	
	Debtor 1 and Debtor 2 only		
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar	
	Is the claim subject to offset?	debts	
	✓ No	✓ Other. Specify <u>CreditCard</u>	
	Yes		

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JaTaun Robinson-Swopes Debtor 1 Case number (if known) First Name Middle Name Part 4: Add the Amounts for Each Type of Unsecured Claim Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim. **Total claims** \$0.00 **Total claims** 6a. Domestic support obligations. from Part 1 \$341.00 6b. Taxes and certain other debts you owe the government 6b. 6c. Claims for death or personal injury while you were \$0.00 intoxicated \$0.00 6d. Other. Add all other priority unsecured claims. Write that amount here. \$341.00 6e. Total. Add lines 6a through 6d. 6e. **Total claims** \$0.00 **Total claims** 6f. Student loans 6f. from Part 2 6g. Obligations arising out of a separation agreement or \$0.00 divorce that you did not report as priority claims 6h. Debts to pension or profit-sharing plans, and other similar 6h.

6i. Other. Add all other nonpriority unsecured claims. Write

that amount here.

6j. Total. Add lines 6f through 6i.

\$32,740.00

\$32,740.00

6j.

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Fill in this inform	ation to identify your cas	e:		
Debtor 1	JaTaun		Robinson-Swopes	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	_
United States Ba	ankruptcy Court for the:	Northern	District of Illinois	
			(State)	
Case number (If known)				_
	Form 106G e G: Execut		s and Unexpire	Check if this is ar amended filing  d Leases
	d, copy the additional p			equally responsible for supplying correct information. If more page. On the top of any additional pages, write your name
1. Do you ha	ave any executory	contracts or unexpi	red leases?	
No. Che	ck this box and file this fo	rm with the court with your o	other schedules. You have nothing	ng else to report on this form.
Yes. Fill i	in all of the information be	elow even if the contracts o	r leases are listed on Schedule	A/B: Property (Official Form 106A/B).

2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease

State what the contract or lease is for

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Fill i	in this infor	mation to identify your ca	ase:		
Deb	otor 1	JaTaun		Robinson-Swopes	
		First Name	Middle Name	Last Name	
	otor 2	a) <del></del>	MC LH - Ma	Leathless	_
(Spi	Juse, II IIIII	g) First Name	Middle Name	Last Name	
Unit	ted States I	Bankruptcy Court for the:	Northern	District of Illinois	
Coo				(State)	
	se number nown)				_
					Check if this is an amended filing
Of	ficial	Form 106H			
Sc	hadu	le H: Your C	odehtors		12/15
<u>J</u>	neuu	ie n. Tour C	ouebiois		12/13
1.	✓ No ☐ Yes Within the	ave any codebtors? (If	u lived in a community pro		ebtor.)  nmunity property states and territories include Arizona, California,
			xico, Puerto Rico, Texas, Wa	shington, and Wisconsin.)	
		Go to line 3.		and the second state of the second	
		•	spouse, or legal equivalent liv	e with you at the time?	
		No Yes. In which community	state or territory did you live?	'Fill in th	ne name and current address of that person.
		,			
		Name of your spouse,	former spouse, or legal equiv	/alent	-
		Number Street			-
		Turner Gureat			
		City	State	Zip Code	-
2	In Calum	a 1 liet ell et vermes de	htoro Do not include	r anguag ag a gadabtar if	ur analysis is filing with you. List the narrown shows in the 2
	again as a	a codebtor only if that	person is a guarantor or co	osigner. Make sure you have	r spouse is filing with you. List the person shown in line 2 listed the creditor on <i>Schedule D</i> (Official Form 106D), e.D, Schedule E/F, or Schedule G to fill out Column 2.

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

Official Form 106H Schedule H: Your Codebtors page 1

Column 1: Your codebtor

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Fill in this in	nformation to identify	y your case:					
Debtor 1	JaTaun		Robinson-		_		
Dalatan	First Name	Middle Name	Last Name	9		Check if this is:	
Debtor 2 (Spouse, if filing	g) First Name	Middle Name	Last Name	<del></del>	_	An amended filing	
	Bankruptcy Court for the:	Northern	District of Illinoi (State		_	A supplement showing expenses as of the form	ing post-petition chapte ollowing date:
Case number (If known)			(State	<del>-</del>	-	MM / DD / YYYY	_
Official I	Form 106I						
Schedu	le I: Your Inc	ome					1
include info additional p	rmation about you	about your spouse. I r spouse. If more spa ame and case number ent	ce is needed,	attach a s	separate she	eet to this form. O	
1. Fill	in your employment		Debtor 1			Debtor 2	
If yo	ormation. ou have more than one	Employment status	Employed  Not Emplo	wod		Employed  Not Employed	
job, atta	ich a separate page with		Not Emplo	yeu		Not Employed	
	rmation about additional	Occupation					
·	oloyers.	Employer's name	State of Illinois	s - Leslie Gei	ssler Munger		
or	ude part time, seasonal, -employed work.	Employer's address	325 W Adams Number Street	St		Number Street	
	cupation may include dent						
or h	omemaker, if it applies.		Springfield City	Illinois State	62704 Zip Code	City	State Zip Code
		How long employed there?	29 years				_
Estimate mo you are separa	ated.	Monthly Income  date you file this form. If your one than one employer, combine that one employer.	-	or all employe			
		ry, and commissions (before alculate what the monthly wage			\$6,013.00		
3. Estimate	e and list monthly over	time pay.	3.		+ \$0.00		

\$6,013.00

4. Calculate gross income. Add line 2 + line 3.

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Debi	tor 1 Ja laun Middle Neme	Robinson-Swopes	Case number	(if known)	
	First Name Middle Name	Last Name	For Debtor 1	For Debtor 2 or non-filing spouse	
Co	opy line 4 here	<b>→</b> 4.	\$6,013.00		
5. <b>Li</b> s	st all payroll deductions:				
5	a. Tax, Medicare, and Social Security deductions	5a	\$1,038.08		
51	b. Mandatory contributions for retirement plans	5b	\$0.00		
5	c. Voluntary contributions for retirement plans	5c	\$240.72		
5	d. Required repayments of retirement fund loans	5d	\$0.00	·	
5	e. Insurance	5e	\$0.00	- <u></u> -	
51	f. Domestic support obligations	5f	\$0.00	- <u></u> -	
5	g. Union dues	5g	\$67.40	- <u></u> -	
51	n. Other deductions. Specify:	5h. + _	\$326.66 +	·	
6. <b>Ac</b> +5h.	Id the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5	5f + 5g 6	\$1,672.86		
7. <b>C</b> a	alculate total monthly take-home pay. Subtract line 6 from line	<del>2</del> 4. 7	\$4,340.14		
	st all other income regularly received:				
8	<ul> <li>a. Net income from rental property and from operating a business, profession, or farm</li> <li>Attach a statement for each property and business showing groups</li> </ul>	066			
	receipts, ordinary and necessary business expenses, and the to monthly net income.		\$0.00		
81	b. Interest and dividends	8b	\$0.00		
8	c. Family support payments that you, a non-filing spouse, or dependent regularly receive	or a			
	Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c	\$0.00		
	d. Unemployment compensation	8d	\$0.00		
	e. Social Security	8e	\$0.00		
81	f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cas assistance that you receive, such as food stamps (benefits unde the Supplemental Nutrition Assistance Program) or housing subsidies	er			
	Specify:	8f	\$0.00		
	g. Pension or retirement income	8g	\$0.00		
	h. Other monthly income. Specify:		\$0.00 +		
9. <b>Ac</b>	Id all other income Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g -	+ 8h. 9	\$0.00		
	alculate monthly income. Add line 7 + line 9. dd the entries in line 10 for Debtor 1 and Debtor 2 or non-filing sp	pouse	\$4,340.14	=	\$4,340.14
In re	tate all other regular contributions to the expenses that your local contributions from an unmarried partner, members of your local contributions from an unmarried partner, members of your local contributions.  In onot include any amounts already included in lines 2-10 or amounts.	household, your deper	.,		
S	pecify:			1	1. + \$0.00
	dd the amount in the last column of line 10 to the amount Irite that amount on the Summary of Schedules and Statistical Su				2. \$4,340.14
	,	•			Combined monthly income
13.	o you expect an increase or decrease within the year after y	you file this form?			-
L	Yes. Explain:				

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Debtor 1	JaTaun		Robinson-Swopes	Case number (if known)		
	First Name	Middle Name	Last Name			
Part 2:	Give Details About Mo	onthly Income				
				For Debtor 1	For Debtor 2 or non-filing spouse	
5h.Other	payroll deductions. Specify:					
1. Asso	ciation Dues			\$4.00		
2. Healt	thcare			\$130.00		
3. Other	r Insurance			\$192.66		

Official Form 106l Schedule I: Your Income page 3

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Fill in this inform	nation to identify your	2000:			
FIII IN this inform	ation to identify your	case.			
Debtor 1	JaTaun		Robinson-Swopes		
Dahtar 0	First Name	Middle Name	Last Name		
Debtor 2 (Spouse, if filing	First Name	Middle Name	Last Name	Check if this is:	
				An amended filin	
United States B	ankruptcy Court for the	e: Northern	District of Illinois (State)	A supplement sh expenses as of the	owing post-petition chapter 13
Case number			(Giale)	expenses as or ti	ie ioliowii ig date.
(If known)				MM / DD / YYYY	<del></del>
Official I	orm 106J				
Schedul	e J: Your E	Expenses			12/
information. If r			e filing together, both are equally reform. On the top of any additional		
Part 1: Desc	ribe Your House	ehold			
1. Is this a join	t case?				
✓ No. Go	to line 2				
Yes. Do	es Debtor 2 live in a	a separate household?			
	<b> </b> No	•			
	_	# #In Official Farmer 400 LO Farmer	and for Communical Lieuwahald of Dahin	-0	
L		· '	ses for Separate Household of Debtor	· Z.	
2. Do you have dependents?	e <u> </u>	No			
Do not list De Debtor 2.	ebtor 1 and	Yes. Fill out this information for each dependent	Dependent's relationship to Debtor 1 or Debtor 2 Relative	Dependent's age	Does dependent live with you?  No.  Yes.
			Relative	14 years	No. ✓ Yes.
	-	No Yes			_
Part 2: Estin	nate Your Ongoi	ng Monthly Expenses			
	of a date after the ba		you are using this form as a supple plemental Schedule J, check the b		
		n-cash government assistance ed it on Schedule I: Your Income			Your expenses
	or home ownership or the ground or lot. 4.	expenses for your residence. Ind	clude first mortgage payments and		<b>\$0.00</b>
If not inclu	uded in line 4:				
4a. Real es	state taxes				4a <b>\$650.00</b>
4b. Propert	y, homeowner's, or re	nter's insurance			4b. <b>\$150.00</b>
4c. Home r	naintenance, repair, ar	nd upkeep expenses			4c. <b>\$0.00</b>
4d. Homeo	wner's association or	condominium dues			4d. <b>\$0.00</b>

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Robinson-Swopes Debtor 1 JaTaun Case number (if known) First Name Middle Name Your expenses 5. Additional mortgage payments for your residence, such as home equity loans \$0.00 5. 6. Utilities: 6a. Electricity, heat, natural gas \$325.00 6a. 6b. Water, sewer, garbage collection \$80.00 6b. 6c. Telephone, cell phone, Internet, satellite, and cable services \$150.00 6c. 6d. Other. Specify: \$0.00 6d 7. Food and housekeeping supplies \$450.00 7. 8. Childcare and children's education costs \$0.00 8. 9. Clothing, laundry, and dry cleaning 9. \$200.00 10. Personal care products and services \$200.00 10. 11. Medical and dental expenses \$90.00 11. 12. Transportation. Include gas, maintenance, bus or train fare. \$370.00 12. Do not include car payments 13. Entertainment, clubs, recreation, newspapers, magazines, and books \$45.00 13. 14. Charitable contributions and religious donations \$0.00 14. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance \$0.00 15a 15b. Health insurance \$0.00 15b 15c. Vehicle insurance 15c \$200.00 15d. Other insurance. Specify: \_\_\_ 15d \$0.00 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: \$0.00 16 17. Installment or lease payments: 17a. Car payments for Vehicle 1 17a \$0.00 17b. Car payments for Vehicle 2 17b \$0.00 17c. Other. Specify: \$0.00 17c 17d. Other. Specify: \$0.00 17d 18. Your payments of alimony, maintenance, and support that you did not report as deducted from \$0.00 your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. 19. Other payments you make to support others who do not live with you. Specify: \$0.00 19. 20.Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property \$0.00 20a 20b. Real estate taxes. \$0.00 20h 20c. Property, homeowner's, or renter's insurance \$0.00 20c 20d. Maintenance, repair, and upkeep expenses. \$0.00 20d 20e. Homeowner's association or condominium dues \$0.00 20e

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Debtor 1	JaTaun		Robinson-Swopes	Case number (if known)		
	First Name	Middle Name	Last Name			
21.Other	. Specify:				21	\$0.00
22. <b>Calc</b> u	ılate your monthly ex	penses.				\$2,910.00
	add lines 4 through 21.	•				\$2,910.00
	J	xpenses for Debtor 2), if any, fro	m Official Form 106J-2			\$2,910.00
	.,	he result is your monthly expens			22.	φ2,310.00
23 Calcu	late your monthly ne	t income			22.	
		nined monthly income) from Sch	adula I		00	<b>*</b> 104044
	.,	,	edule I.		23a	\$4,340.14
23b. C	copy your monthly expe	nses from line 22 above.			23b	\$2,910.00
		kpenses from your monthly incor	ne.			\$1,430.14
•	The result is your mont	hly net income.			23c	
24. <b>Do y</b> o	ou expect an increase	e or decrease in your expense	es within the year after you fil	le this form?		
			n within the year or do you expect modification to the terms of your			
<b>✓</b> N	No					
	⁄es					
	Explain here:					
	2/\$10					

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Fill in this information to identify your case:									
Debtor 1	JaTaun		Robinson-Swopes						
	First Name	Middle Name	Last Name						
Debtor 2									
(Spouse, if filing	ng) First Name	Middle Name	Last Name						
United States	Bankruptcy Court for the:	Northern	District of Illinois						
Case number (If known)			(State)						

#### Official Form 106Dec

### Check if this is an amended filing

#### **Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Par	t1: Sign Below							
	Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?							
	✓ No							
	Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).						
	Under penalty of perjury, I declare that I have read the summary a	ad calcular filed with this declaration and						
	that they are true and correct.	id schedules filed with this declaration and						
×	/s/ JaTaun Robinson-Swopes	×						
	Signature of Debtor 1	Signature of Debtor 2						
	Date 11/17/2016	Date						
	MM/DD/YYYY	MM/DD/YYYY						

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check if this is an mended filing
theck if this is an mended filing
12/15
nation. If more wer every
otor 2 lived
as Debtor 1
as Debtor 1
3

3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

City

State

Zip Code

**✓** No

City

Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).

Zip Code

State

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First Name	Middle			number (if known)	
rt 2: Explain the Sou	irces of Your I	Income			
Did you have any incor Fill in the total amount of	ne from employm income you receive a joint case and you	ent or from operating a bed from all jobs and all busing	ousiness during this year or nesses, including part-time sive together, list it only once ur	-	years?
		Debtor 1		Debtor 2	
		Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
From January 1 of cu the date you filed for		Wages, commissions, bonuses, tips Operating a business	\$61453.08	Wages, commissions, bonuses, tips Operating a business	
For last calendar year (January 1 to December		Wages, commissions, bonuses, tips Operating a business	\$67765.44	Wages, commissions, bonuses, tips Operating a business	
For the calendar year (January 1 to December		Wages, commissions, bonuses, tips Operating a business	\$67700.00	Wages, commissions, bonuses, tips Operating a business	
benefit payments; pension case and you have income	ns; rental income; in that you received gross income from	nterest; dividends; money co together, list it only once und	of other income are alimony; chollected from lawsuits; royalties der Debtor 1.  not include income that you lis	s; and gambling and lottery wi	
		Debtor 1		Debtor 2	
		Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income from each source (before deductions an exclusions)
From January 1 of co					
For last calendar yea (January 1 to December					
For the calendar yea (January 1 to December					

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Debtor 1 JaTaun Robinson-Swopes Case number (if known) Middle Name First Name Part 3: List Certain Payments You Made Before You Filed for Bankruptcy 6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts? No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425\* or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$6,425\* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. \* Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? ✓ No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Dates of payment Total amount paid Amount you still owe Was this payment for... Mortgage Creditor's Name Car Number Street Credit card Loan repayment Suppliers or City State Zip Code vendors Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment Suppliers or City State Zip Code vendors Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment Suppliers or City Zip Code State vendors Other

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Debt	or 1	JaTaun First Name		Middle Name		binson-Swopes st Name	Case number (i	f known)
	Insic corp ager	lers include your r orations of which	relatives; any you are an o or a busines	y general partners; officer, director, per s you operate as a	relatives of any grown in control, or	owner of 20% or mo	tnerships of which y ore of their voting sec	no was an insider? ou are a general partner; curities; and any managing mestic support obligations,
		No Yes. List all paym Insider's Name	ents to an ir	nsider.	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
		Number Street						
	_	City	State	Zip Code				
		Insider's Name						
		Number Street						
		City	State	Zip Code				
i	nsic	ler?		or bankruptcy, die		payments or trans	fer any property o	n account of a debt that benefited an
		No Yes. List all paym	ents that ber	nefited an insider.				
	_				Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
								Include creditor's name
		Insider's Name						
		Number Street						
	_	City	State	Zip Code				
		Insider's Name						
		Number Street						
		City	State	Zip Code				

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Deb	tor 1	JaTaun			Robinson-Swo	pes C	Case number (if	known)	
		First Name		Middle Name	Last Name				
Part	4:	Identify Legal	Actions, Re	possessions	, and Foreclosure	s			
	List a	all such matters, inclused act disputes.			ou a party in any lawsu all claims actions, divorce				ng? r custody modifications, and
		No Yes. Fill in the detail	s.						
				Natu	re of the case	Court or a	agency		Status of the case
		Case title							Pending
						Court Nan	ne		On appeal
		Case number				NumberSt	reet		Concluded
						City	State	Zip Code	
		Case title							Pending
						Court Nam	ne		On appeal
		Case number				NumberSt	reet		Concluded
						City	State	Zip Code	
		No. Go to line 11.  Yes. Fill in the info	mation below.		Describe the prope	erty		Date	Value of the property
		Creditor's Name			Explain what happ	ened			
		Number Street							
					Property was re	•			
					Property was ga				
		City	State	Zip Code	Property was at		or levied.		
					Describe the prope	erty		Date	Value of the property
		Creditor's Name							
		Orealtor 3 Name			Explain what happ	ened			
		Number Street			_				
					Property was re				
					Property was fo				
		City	State	Zip Code	Property was at		or levied.		

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Debt	tor 1	JaTaun	Robinson-Swopes	Case number (if known)	
		First Name Middle Name	Last Name	<u> </u>	
11.		hin 90 days before you filed for bankruptcy, di ounts or refuse to make a payment because yo		r financial institution, set off any am	ounts from your
	<b>✓</b>	No Yes. Fill in the details.			
			Describe the action the cred	ditor took Date action was taken	Amount
		Creditor's Name	_		
		Number Street	Last 4 digits of account numbe	r: XXXX-	
		City State Zip Code	_		
		nin 1 year before you filed for bankruptcy, was ointed receiver, a custodian, or another offici		ession of an assignee for the benefit	of creditors, a court-
		No Yes			
	ш	165			
Part 13.		List Certain Gifts and Contributions thin 2 years before you filed for bankruptcy, d		alue of more than \$600 per person?	
	<b>✓</b>	No Yes. Fill in the details for each gift.			
		Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
		Person to Whom You Gave the Gift	_		<del></del>
		Number Street	_		
		City State Zip Code Person's relationship to you	-		
		Person to Whom You Gave the Gift	_		<del>-</del>
		Number Street	_		

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Deb	tor 1	JaTaun		Robinson-Swopes	_ Case number (if known)		
		First Name	Middle Name	Last Name			
14.	Wit	hin 2 years before you fil	led for bankruptcy, did	you give any gifts or contribution	s with a total value of r	nore than \$600	to any charity?
	<b>V</b>	No					
	Ħ	Yes. Fill in the details for e	each gift or contribution.				
	_	Gifts or contributions t		Describe what you contribute	ed.	Date you	Value
		that total more than \$60		Describe what you contribute	,u	contributed	Value
		Charity's Name		-			
		Onanty o Namo					
				-			
		Number Street		-			
		City State	Zip Code	-			
D		liet Centein Leese					
Par	i 6:	List Certain Losses					
15	With	nin 1 vear hefore vou file	d for hankruntey or sir	nce you filed for bankruptcy, did yo	ou lose anything becau	ise of theft fire	other disaster or
10.		ibling?	a for ballkraptcy of 311	ice you med for bankruptey, did yo	ou lose anything becat	ise of there, me,	otrici disaster, or
		No					
	Ħ	Yes. Fill in the details.					
	ш		la at an d	Describe and income	nama familia laga	Data of	Value of managements
		Describe the property y how the loss occurred	ou lost and	Describe any insurance cove Include the amount that insurance		Date of your loss	Value of property lost
		now the loss occurred		pending insurance claims on line		1033	1031
				A/B: Property.			
		I					
	Inclu	ide any attorneys, bankrupt No Yes. Fill in the details.	tcy petition preparers, or	credit counseling agencies for service	es required in your bankr	uptcy.	
				Description and value of any transferred	property	Date payment or transfer was made	Amount of payment
		Semrad Law Firm		Attorney's Fee - 350.00		11/16/2016	\$350.00
		Person Who Was Paid					<del>*************************************</del>
		11101 S. Western Avenue					
		Number Street					
		Chicago Illinoi	s 60643				
		City State	Zip Code				
		Email or website address					
		Person Who Made the Pa	nyment if Not You	•			
		1 clock who wade the fa	dymoni, ii riot rod				
		Dorson Who Was Daid					
		Person Who Was Paid					
		Number Street		•			
		· 					
				-			
		City State	Zip Code	•			
			<u> </u>	_			
		Email or website address					
		Person Who Made the Pa	wmont if Not Vo.				

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Deb	tor 1			Robinson-Swopes	Case number (if known)		
		First Name	Middle Name	Last Name			
17.	help	hin 1 year before you filed to you deal with your credito not include any payment or tra  No  Yes. Fill in the details.	rs or to make payment		r behalf pay or transfer	any property to any	one who promised to
	ш	res. Fili in the details.					
				Description and value of an transferred	y property		Amount of payment
		Person Who Was Paid					
		Number Street					
		City State	Zip Code				
		Oity Otato	Zip Code				
	Inclu	ordinary course of your bu ude both outright transfers and sfers that you have already list No Yes. Fill in the details.	d transfers made as secu	urity (such as the granting of a se			Do not include gifts and
				Description and value of ar property transferred		y property or eceived or debts pa	Date id transfer was made
		Person Who Received Tran	sfer				
		Number Street					
		City State Person's relationship to you	Zip Code				
		Person Who Received Tran	sfer				
		Number Street					
		City State Person's relationship to you	Zip Code				
19.		hin 10 years before you file ese are often called asset-pro		ou transfer any property to a s	self-settled trust or simi	lar device of which	you are a beneficiary?
		No Yes. Fill in the details.					
	_	33.3.		Description and value of t	he property transferred	i	Date transfer was made
		Name of trust					

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Debt	or 1	JaTaun First Name	Middle Name		Robinson-Swope Last Name	S	Case number (if known)		
Part	8:	List Certain Financial	Accounts, Inst	ruments	s, Safe Depos	it Boxes	, and Storage Units		
	mov Inclu	nin 1 year before you filed for yed, or transferred? Ide checking, savings, money peratives, associations, and ot	market, or other fina	ancial acco				-	
	✓ □	No Yes. Fill in the details.						_	
				number	digits of accour	_	pe of account or strument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
		Person Who Was Paid		XXXX-		F	Checking Savings		
		Number Street					Money market  Brokerage  Other		
		City State	Zip Code				<u>.</u>		
		Person Who Was Paid		XXXX-			Checking Savings		
		Number Street				Ē	Money market  Brokerage		
							Other		
		City State	Zip Code						
		you now have, or did you ha er valuables? No	ive within 1 year b	efore you	filed for bankrup	tcy, any sa	fe deposit box or other de	epository for secu	rities, cash, or
		Yes. Fill in the details.							
				Who els	e had access to	it?	Describe the con-	tents	Do you still have it?
		Name of Financial Institution	1	Name					☐ No ☐ Yes
		Number Street		Number	Street				
				City	State	Zip Cod	е		
22	Llave	City State	Zip Code	a ath as the	an	ishin d year	u before very filed for bond	rmumtous?	
22.		e you stored property in a s	torage unit or plac	e other th	an your nome w	ıtılırı i yea	r before you filed for bank	ruptcy?	
		No Yes. Fill in the details.							
				Who els	e had access to	it?	Describe the conf	ents	Do you still have it?
		Name of Storage Facility		Name					☐ No ☐ Yes
		Number Street		Number	Street				☐ 1es
				City	State	Zip Cod	e		
		City State	Zip Code						

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	F:	Robinson-Swopes Case number (if kn						
	First Name Middle Name	Last Name						
t 9:	Identify Property You Hold or Co	ntrol for Someone Else						
Do	you hold or control any property that so	neone else owns? Include any property you borrowed fro	m, are storing for, or hold in trust for					
sor	neone.							
<b>✓</b>	No							
	Yes. Fill in the details.							
		Where is the property? Describe	e the contents Value					
	Owner's Name	Number Street						
	Owner's Name	Number Street	<del></del>					
	Number Street							
		City State Zip Code						
	City State Zip Code							
10:	Give Details About Environmen	al Information						
	purpose of Part 10, the following definitions a	•						
		r local statute or regulation concerning pollution, contamination						
		erial into the air, land, soil, surface water, groundwater, or other cleanup of these substances, wastes, or material.	medium,					
		•						
	or used to own, operate, or utilize it, including	defined under any environmental law, whether you now own, op disposal sites.	erate, or utilize it					
		' Imental law defines as a hazardous waste, hazardous substanc	2					
	oxic substance, hazardous material, pollutant		<del>5</del> ,					
эоп а	all notices, releases, and proceedings that you	know about, regardless of when they occurred.						
Had	s any governmental unit notified you that	you may be liable or potentially liable under or in violation						
Has	o any governmental and notined you that		n of an environmental law?					
¥	i	,	n of an environmental law?					
	No	,	n of an environmental law?					
Ш	No Yes. Fill in the details.							
			n of an environmental law?  mental law, if you know it  Date of notice					
			mental law, if you know it Date of					
			mental law, if you know it Date of					
	Yes. Fill in the details.	Governmental unit Environr	mental law, if you know it Date of					
	Yes. Fill in the details.  Name of site	Governmental unit  Governmental unit	mental law, if you know it Date of					
	Yes. Fill in the details.  Name of site	Governmental unit  Governmental unit	mental law, if you know it Date of					
	Yes. Fill in the details.  Name of site  Number Street	Governmental unit  Governmental unit  Number Street	mental law, if you know it Date of					
	Yes. Fill in the details.  Name of site  Number Street  City State Zip Code	Governmental unit  Governmental unit  Number Street  City State Zip Code	mental law, if you know it Date of					
Ha	Yes. Fill in the details.  Name of site  Number Street	Governmental unit  Governmental unit  Number Street  City State Zip Code	mental law, if you know it Date of					
Hav	Yes. Fill in the details.  Name of site  Number Street  City State Zip Code	Governmental unit  Governmental unit  Number Street  City State Zip Code	mental law, if you know it Date of					
Hav	Yes. Fill in the details.  Name of site  Number Street  City State Zip Code  ve you notified any governmental unit of	Governmental unit  Governmental unit  Number Street  City State Zip Code	mental law, if you know it Date of					
Hav	Name of site  Number Street  City State Zip Code  ve you notified any governmental unit of  No	Governmental unit  Governmental unit  Number Street  City State Zip Code  ny release of hazardous material?	mental law, if you know it Date of					
Hav	Name of site  Number Street  City State Zip Code  ve you notified any governmental unit of  No	Governmental unit  Governmental unit  Number Street  City State Zip Code  ny release of hazardous material?	nental law, if you know it  Date of notice					
Ha*	Name of site  Number Street  City State Zip Code  ve you notified any governmental unit of  No  Yes. Fill in the details.	Governmental unit  Governmental unit  Number Street  City State Zip Code  my release of hazardous material?  Governmental unit  Environr	mental law, if you know it  Date of notice					
Hav	Name of site  Number Street  City State Zip Code  ve you notified any governmental unit of  No	Governmental unit  Governmental unit  Number Street  City State Zip Code  ny release of hazardous material?	mental law, if you know it  Date of notice					
Ha*	Name of site  Number Street  City State Zip Code  ve you notified any governmental unit of  No  Yes. Fill in the details.	Governmental unit  Governmental unit  Number Street  City State Zip Code  my release of hazardous material?  Governmental unit  Environr	mental law, if you know it  Date of notice					
Hav	Name of site  Number Street  City State Zip Code  ve you notified any governmental unit of  No  Yes. Fill in the details.  Name of site	Governmental unit  Governmental unit  Number Street  City State Zip Code  ny release of hazardous material?  Governmental unit  Governmental unit  Number Street	mental law, if you know it  Date of notice					
Ha <sup>a</sup>	Name of site  Number Street  City State Zip Code  ve you notified any governmental unit of  No  Yes. Fill in the details.  Name of site	Governmental unit  Governmental unit  Number Street  City State Zip Code  my release of hazardous material?  Governmental unit  Environr	mental law, if you know it  Date of notice					

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Debt	or 1	JaTaun First Name		Middle North	Robinson-Swope	es Case	e number <i>(if k</i>	nown)	
		First Name		Middle Name	Last Name				
26.	Hav	e you been a party	/ in any judici	al or administra	tive proceeding under a	ny environment	al law? Inc	lude settlements and	orders.
	<b>✓</b>	No							
		Yes. Fill in the deta	ils.						
				'	Court or agency		Nature o	of the case	Status of the case
		Case title							Pending
					Court Name				
		Case number		<u></u>	Number Street				On appeal
		odoo namboi		_					Concluded
				(	City State	Zip Code			
Part	11:	Give Details A	bout Your	Business or	Connections to Any	/ Business			
27.	With	nin 4 vears hefore	you filed for l	hankruntev did	you own a business or h	ave any of the f	iollowing co	onnections to any bus	iness?
21.	VVILI		you med for i	banki upicy, ulu	you own a business or n	lave any of the f	Ollowing Co	onnections to any bus	on 1633 :
				-	profession, or other activity,		or part-time		
		=	-	y company (LLC)	or limited liability partnersh	nip (LLP)			
		A partner in a							
			_	ging executive of a					
		An owner of at	t least 5% of th	e voting or equity	securities of a corporation				
	<b>✓</b>	No. None of the abo							
		Yes. Check all that	apply above ar	nd fill in the details	s below for each business.				
					Describe the natur	e of the busines	ss	Employer Identification	
								include Social Secu	rity number or ITIN.
		Business Name			_			EIN:	
		Number Street			Name of accounta	nt or bookkeens	er	Dates business exis	ted
		City	Ctoto	Zin Codo	_			From To	
		City	State	Zip Code					
					Describe the natur	e of the busines	ss	Employer Identification	tion number Do not
								include Social Secu	rity number or ITIN.
		Business Name			_			EIN:	
		Number Street			Name of accounta	nt or bookkeepe	er	Dates business exis	ted
		City	Ctoto	Zin Codo	_			FromTo	
		City	State	Zip Code					
					Describe the natur	e of the busines	ss	Employer Identifica	tion number Do not
					, , , , , , , , , , , , , , , , , , , ,			include Social Secu	
		Business Name			-			EIN:	
		Daoin 1000 Harrie							
		Number Street			Name of accountage	nt or bookkeen	er	Dates business exis	ted
		<u> </u>			— Ivanie di accounta	in or bookkeept	51	From To _	
		City	State	Zip Code				1011110	

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Deb	tor 1	JaTaun		Robinson-Swopes	Case number (if known)
		First Name	Middle Name	Last Name	
28.		hin 2 years before you filed fiditors, or other parties.  No Yes. Fill in the details below.	for bankruptcy, did you เ	give a financial statement to	anyone about your business? Include all financial institutions,
				Date issued	
		Name		MM/DD/YYYY	
		Number Street			
		City State	Zip Code		
Port	t 12:	Sign Below			
	true a	and correct. I understand the ruptcy case can result in fine	at making a false statem	nent, concealing property, or prisonment for up to 20 years	and I declare under penalty of perjury that the answers are robtaining money or property by fraud in connection with a s, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.
		/s/ JaTaun Ro	binson-Swopes	×	
		Signature of Debt	tor 1		Signature of Debtor 2
		Date 11/17/2016			Date
	Did y	ou attach additional pages t	to Your Statement of Fir	nancial Affairs for Individua	s Filing for Bankruptcy (Official Form 107)?
	Ξ.	No Yes			
	Did y	ou pay or agree to pay some	eone who is not an attor	ney to help you fill out bank	ruptcy forms?
	[]	No			
		Yes. Name of person			Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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B 203 (12/94)

In

#### **UNITED STATES BANKRUPTCY COURT**

#### **Northern District of Illinois**

re	JaTaun Robinson-Swopes		Case No.	
_	Debtor		_	(If known)
			Chapter	Chapter 13
	DISCLOSURE OF CO	MPENSATION	OF ATTORNEY	FOR DEBTOR
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. that compensation paid to me within one services rendered or to be rendered on b is as follows:	year before the filing	of the petition in bankruptcy,	or agreed to be paid to me, for
	For legal services, I have agreed to acce	pt		\$4,000.00
	Prior to the filing of this statement I have	e received		\$350.00
	Balance Due			\$3,650.00
2.	The source of the compensation paid to n	ne was:		
	Debtor	Other (specify	)	
3.	The source of the compensation paid to r	me is:		
	<b>✓</b> Debtor	Other (specify	)	
4.	I have not agreed to share the above members and associates of my law	e-disclosed compensa firm.	tion with any other person ur	nless they are
	I have agreed to share the above-disk members or associates of my law fir the people sharing in the compensation	m. A copy of the agre		
5.	In return for the above-disclosed fee, I have a. Analysis of the debtor's financial subankruptcy;	_	- ·	· · · · · · · · · · · · · · · · · · ·
	b. Preparation and filing of any petiti	on, schedules, staten	nents of affairs and plan whic	ch may be required;
	c. Representation of the debtor at the	e meeting of creditors	and confirmation hearing, a	nd any adjourned hearings thereof;
	d. Representation of the debtor in ac	dversary proceedings	and other contested bankrup	otcy matters;
6.	By agreement with the debtor(s), the abo	ve-disclosed fee does	s not include the following se	rvices:
		CERTIFICA	ATION	
	I certify that the foregoing is a complete st ne debtor(s) in this bankruptcy proceedings		ement or arrangement for pa	yment to me for representation
	11/17/2016		/s/ Megan Holmes	
	Date		Signature of Attorney	
			Semrad Law Firm	
			Name of law firm	

### UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

### RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Use for cases filed on or after September 19, 2016)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtors and the attorney that conflicts with this agreement is void.

#### A. BEFORE THE CASE IS FILED

#### THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

#### THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule and explain how and when the attorney's fees and the trustee's fees are determined and paid.
- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.

6. Advise the debtor of the need to maintain appropriate insurance.

#### B. AFTER THE CASE IS FILED

#### THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly, or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and, when the case is called, for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce.)
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property, and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

#### THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors, and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.

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- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default, or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Prepare, file, and serve a notice of conversion to Chapter 7, pursuant to § 1307(a) of the Bankruptcy Code and Local Bankruptcy Rule 1017-1.
- 17. Provide any other legal services necessary for the administration of the case.

### C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3.If the case is converted to a case under Chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the Chapter 7 case for any unpaid fees and expenses, pursuant to § 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

#### D. RETAINERS AND PREVIOUS PAYMENTS

- 1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.
- The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:
- (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:

  Client understands that any funds that client is rendering to The Semrad Law Firm, LLC as part of the advance payment retainer shall immediately become the property of The Semrad Law Firm, LLC in exchange for a commitment by The Semrad Law Firm, LLC to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC and will be used for general expense of the firm. Client further understands that it is ordinarily the client's option to deposit funds with an attorney that shall remain client's property as security for future services. However, The Semrad Law Firm, LLC does not represent clients under such a security retainer because the preparation of a bankruptcy cases requires many disparate tasks and functions for the attorney and support staff; some of which require legal expertise while other may be only ministerial in nature. Client further understands that the benefit that client is receiving under the fee arrangement is the commitment of The Semrad Law Firm, LLC to perform any and all work reasonably necessary to represent client's interest absent any extraordinary circumstance.
- (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- (c) The retainer is a flat fee for the services to be rendered during the chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;
- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation, the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing, including the date(s) any such fees were paid.

#### E. CONDUCT AND DISCHARGE

- 1. *Improper conduct by the attorney.* If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. *Improper conduct by the debtor*. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

#### F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$4,000.00
- 2. In addition, the debtor will pay the filing fee in the case and other expenses of \$371.76

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- 3. Before signing this agreement, the attorney has received, \$350.00 toward the flat fee, leaving a balance due of \$3,650.00; and \$61.76 for expenses, leaving a balance due of \$4,021.76
- 4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

Date: 11/16/2016	
Signed:	
/s/ JaTaun Robinson-Swopes On the life Jurgs	- 1/1
	/s/ Megan Holmes Wash Holle
Debtor(s)	Attorney for Debtor(s)

Do not sign if the fee amounts at top of this page are blank.

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### This notice is for you if:

You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

#### Chapter 7: Liquidation

	\$245	filing fee
	\$75	administrative fee
+	\$15	trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form - the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form - sometimes called the *Means Test* - deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

### Chapter 12: Repayment plan for family farmers or fishermen

-	\$275	total fee
+	\$75	administrative fee
	\$200	filing fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes,
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers.
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure.

### Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury either orally or in writing in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

## Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

# Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from:

http://www.justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit 20AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

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#### **UNITED STATES BANKRUPTCY COURT**

**Northern District of Illinois** 

In re: _	Robinson-Swopes, JaTaun	Case No	Case No			
	Debtor(s)	Chantar	01			
		Chapter.	Chapter13			
	VERIFICATION OF CREDITOR MATRIX					
	The above named Debtors hereby verify that t	he attached list of creditors is true	and correct to the best of their	knowledg		
Date:	11/17/2016	/s/ Robinson-Sw	opes, JaTaun			
		Robinson-Swop Signature of Del	· ·			

GM Financial PO 183834 Arlington , TX 76096

SPRINGLEAF FINANCIAL S 601 NW second street Evansville , IN 47708

SEARS/CBNA PO BOX 6282 SIOUX FALLS, SD 57117

THD/CBNA P.O. Box 105972 Atlanta , GA 30348

SYNCB/WALMAR PO BOX 965024 EL PASO , TX 79998

CAPITAL ONE AUTO FINAN 3901 DALLAS PKWY PLANO, TX 75093

CREDITONEBNK PO BOX 98872 LAS VEGAS , NV 89193

SYNCB/JCP PO BOX 965007 ORLANDO , FL 32896

cb/carson PO BOX 15521 Wilmington , DE 19805

GLOBAL NETWK 5320 COLLEGE BLVD SHAWNEE MISSIO , KS 66211

SYNCB/VALUEC C/O PO BOX 965036 ORLANDO , FL 32896 CAP ONE NA 1680 Capital One Drive Mc Lean , VA 22102

SYNCB/CARECR PO Box 960061 Orlando , FL 32896

CAPITAL ONE p.o. box 3001 c/o shraddha bharatia Malvern , PA 19355

RECEIVABLES PERFORMANC 20816 44th Avenue W Lynnwood , WA 98036

CB/ROAMANS P O Box 659728 San Antonio , TX 78265

KOHLS/CAPITAL ONE N56w17000 Ridgewood Dr Menomonee Falls , WI 53051

Cook County Clerk 118 N Clark St Fl 4 Chicago , IL 60602

Cook County Assessor 118 North Clark Street Third Floor, Room #320 Chicago , IL 60602

IRS 1 PO Box 7346 Philadelphia , PA 19101

Advocate Home Health Services 2311 W 22nd Street Oak Brook , IL 60523

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Debtor 1 JaTaun First Name	Middle Name	Robinson-Swopes Last Name	_ Case number (if known)				
	estions for Reporting Purpos						
16. What kind of debts do you have?	16a Ara yayr dahta primarily consumer dahta? Cansumar dahta ara dafinad in 11 LLS C 8 101/8) as						
17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	expenses are paid tha			rty is excluded and administrative creditors?			
<sup>18.</sup> How many creditors do you estimate that you owe?	<ul><li>✓ 1-49</li><li>☐ 50-99</li><li>☐ 100-199</li><li>☐ 200-999</li></ul>	1,000-5,000 5,001-10,00 10,001-25,0	00	25,001-50,000  50,001-100,000  More than 100,000			
19. How much do you estimate your assets to be worth?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$50,000,00	-\$10 million 1-\$50 million 1-\$100 million 01-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion			
20. How much do you estimate your liabilities to be?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$10,000,00 \$50,000,00	-\$10 million 1-\$50 million 1-\$100 million 01-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion			
Part 7: Sign Below	11		-11				
I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.  If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.  If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).  I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.  I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.							
Se prince	/s/ JaTaun Robinson-Swo	pes John Klendurg	Signature of Deb	otor 2			
	Executed on11/16/20	016 DD / YYYY	Executed on	MM / DD / YYYY			

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Fill in this information to identify your case:				
Debtor 1	JaTaun		Robinson-Swopes	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		Northern	District of Illinois	
Case number (If known)			(State)	

#### Official Form 106Dec

Check if this is an amended filing

#### **Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Par	1: Sign Below				
Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?					
	<b>▼</b> No				
col to design on the state.	Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).			
- Action of the control of the contr					
A AN TREVOLONO CONTRACTOR OF A STATE OF A ST	Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.				
×	/s/ JaTaun Robinson-Swopes John Swopes	Signature of Debtor 2			
The second secon	Date 11/16/2016 MM/DD/YYYY	Date MM/DD/YYYY			

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Debtor	· 1 JaTaun		Robinson-Swopes	Case number (if known)
T 20 20 10 10 10 10 10 10 10 10 10 10 10 10 10	First Name	Middle Name	Last Name	
28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institu creditors, or other parties.				t to anyone about your business? Include all financial institutions,
2 7	Yes. Fill in the details b	elow.		
l	<b>1</b>		Date issued	
			111/22 0000	
	Name		MM/DD/YYYY	
	Number Street		<del>-</del>	
			_	
	City Sta	ate Zip Code		
Part 12	2: Sign Below			
I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.  **Signature of Debter 2**  Signature of Debter 2**  Signature of Debter 2**				
	Signature of	Debtor 1	<u> </u>	Signature of Debtor 2
	Date 11/16/	2016		Date
Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?				
	No			
	Yes			
Did	Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?			
V	No			
	Yes. Name of person			Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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Debi	or 1 JaTaun		Robinson-Swopes	Case number (Himowr)	
	First Idama	Middle Name	Last Name	mentaliza	A STATE OF THE STA
16.	Calculate the median family		ou. Follow these steps:	200 W	"
	16a. Fill in the state in which y	ou live.	Illinois		
	16b. Fill in the number of peo-	ole in your household.	3		
	16c. Fill in the median family in household	ncome for your state and si			\$75,454.00
		the separate instructions fo	To find a list o or this form. This list may also	of applicable median income amounts, go online be available at the bankruptcy clark's office.	•
17.	How do the lines compare?	•			
	17a. Line 15b is less than under 11 U.S.C. § 1.	or equal to line 16c. On the 325(b)(3) Go to Part 3. Do	e top of page 1 of this form, o NOT fill out <i>Calculation of D</i>	check box 1, Disposable Income is not determined isposable Income (Official Form 122C-2).	
	U.S.C. § 1325(b)(3)	n line 16c. On the top of pi Go to Part 3 and fill out t ant monthly income from is	Calculation of Disposable In	2, <i>Disposable income is determined under 1 1</i> some (Official Form 122C-2), On line 39 of that	
Pari	Calculate Your Comm	iltment Period Under	11 U.S.C. §1325(b)(4)		
18.	Copy your total average mor	•		de Barrio de Francisco en transferancia con empresa por este colon de Barrio de Lacemente en este con en en esta de Barrio de Alberta de Lacemente de Companyo de Compa	\$6,16G.5B
19.	Deduct the marital adjustme commitment period under 11 t	nt if it applies. If you are i J.S.C. § 1325(b)(4) allows ;	married, your spouse is not til you to deduct part of your spe	ng with you, and you contend that calculating the ouse's income, copy the amount from line 13.	Commence of the latest and the lates
	19a. If the marital adjustment of	loes not apply, fix in 0 on th	ne 19a.		-\$0.00
	19b. Subtract line 19a from I	lne 18.			\$6,166.58
20.	Calculate your current mont	hly Income for the year. F	ollow these steps		
	20a. Copy Ene 19b.				\$6,166.58
	Multiply by 12 (the numb	er of months in a year).			x 12
	20b. The result is your current	nonthly income for the yea	r for this part of the form.		\$73,998.96
	20c. Copy the median family in	come for your state and siz	e of household from line 16c		\$75,454.00
	How do the lines compare?				
	Line 20b is less than ling 2 commitment period is 3 ye	Oc. Unless othorwise ordero ars. Go to Part 4.	d by the court, on the top of	page 1 of this form, check box 3, The	
	Line 20b is more than or e 4. The commitment period	qual to line 20c. Unless others 5 years. Go to Part 4.	erwise ardered by the court, o	n the top of page 1 of this form, check box	
Roid	Sign Below				
***************************************	By simples have I dedone				
	O TO	noe perally of perjory that	uie momaion on ins sizien	nont and in any attachments is true and correct,	
	X /s/ JaTaun Robinso	n-Swoods	×		
	Signature of Debtor 1		atta	e of Deblor 2	
	Date 11/17/2016		Date		
	MM/DD/YYYY		Ñ	IM/DD/YYYY	
	il you checked 17a, do NO	likautorike Fam 122C-2	3.		

if you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.

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#### **UNITED STATES BANKRUPTCY COURT**

**Northern District of Illinois** 

in re:	Debtor(s)	Case No	Case No		
		Chapter.	Chapter13		
	VERIF	ICATION OF CREDITOR MAT	TRIX		
TI knowledge		rify that the attached list of creditors is t	rue and correct to the best of their		
Date:	11/16/2016	/s/ Robinson-Si Robinson-Swop Signature of De	pes, JaTaun		